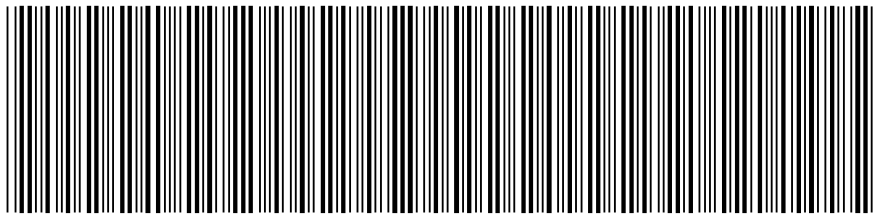


**NYC DEPARTMENT OF FINANCE  
OFFICE OF THE CITY REGISTER**

This page is part of the instrument. The City Register will rely on the information provided by you on this page for purposes of indexing this instrument. The information on this page will control for indexing purposes in the event of any conflict with the rest of the document.


**2006013101714002001E4598**
**RECORDING AND ENDORSEMENT COVER PAGE**
**PAGE 1 OF 5**
**Document ID: 2006013101714002**
**Document Date: 01-17-2006**
**Preparation Date: 01-31-2006**
**Document Type: DEED**
**Document Page Count: 3**
**PRESENTER:**

REGENCY ABSTRACT LLC  
38-50 BELL BOULEVARD  
BAYSIDE, NY 11361  
718-423-5333  
GE-7956-B-2005 4748/52

**RETURN TO:**

PRECILIA OKORONKWO  
32-30 MICKLE AVENUE  
BRONX, NY 10469

**PROPERTY DATA**

Borough	Block	Lot	Unit	Address
BRONX	4748	52	Entire Lot	32-30 MICKLE AVENUE
<b>Property Type: DWELLING ONLY - 2 FAMILY</b>				

**CROSS REFERENCE DATA**

CRFN \_\_\_\_\_ or Document ID \_\_\_\_\_ or \_\_\_\_\_ Year \_\_\_\_\_ Reel \_\_\_\_\_ Page \_\_\_\_\_ or File Number \_\_\_\_\_

**PARTIES**
**GRANTOR/SELLER:**

LARRINE GHOLSTON  
233 W 138TH STREET  
NEW YORK, NY 10030

**GRANTEE/BUYER:**

OCHIEZE OKORONKWO  
948 E. 219TH STREET  
BRONX, NY 10467

☒ Additional Parties Listed on Continuation Page

**FEES AND TAXES**

<b>Mortgage</b>		Recording Fee: \$	52.00
Mortgage Amount:	\$	Affidavit Fee: \$	0.00
Taxable Mortgage Amount:	\$	NYC Real Property Transfer Tax Filing Fee:	
Exemption:		\$	75.00
TAXES: County (Basic):	\$	NYS Real Estate Transfer Tax:	
City (Additional):	\$	\$	1,700.00
Spec (Additional):	\$		
TASF:	\$		
MTA:	\$		
NYCTA:	\$		
Additional MRT:	\$		
TOTAL:	\$		

NYC HPD Affidavit in Lieu of Registration Statement


**RECORDED OR FILED IN THE OFFICE  
OF THE CITY REGISTER OF THE  
CITY OF NEW YORK**

Recorded/Filed 02-07-2006 09:41

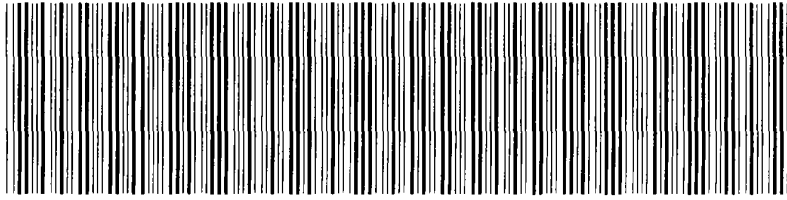
City Register File No.(CRFN):

**2006000070835**

*Annette McMill*

**City Register Official Signature**

NYC DEPARTMENT OF FINANCE  
OFFICE OF THE CITY REGISTER



2006013101714002001C4718

**RECORDING AND ENDORSEMENT COVER PAGE (CONTINUATION) PAGE 2 OF 5**

**Document ID:** 2006013101714002

**Document Date:** 01-17-2006

**Preparation Date:** 01-31-2006

**Document Type:** DEED

**PARTIES**

**GRANTOR/SELLER:**

LAURA M WIGFALL N/K/A LAURA MAE LANE  
233 W 138TH STREET  
NEW YORK, NY 10030

**PARTIES**

**GRANTEE/BUYER:**

PRECILIA OKORONKWO  
948 E. 219TH STREET  
BRONX, NY 10467

Bargain and Sale Deed, with Covenant against Grantor's Acts - Individual or Corporation (Single Sheet)

CONSULT YOUR LAWYER BEFORE SIGNING THIS INSTRUMENT—THIS INSTRUMENT SHOULD BE USED BY LAWYERS ONLY.

THIS INDENTURE, made the 17 day of JANUARY, in the year 2006

BETWEEN LAURA M. WIGFALL AND LARRINE GHOLSTON RESIDING AT 233 W 138<sup>TH</sup> STREET, NEW YORK, NEW YORK 10030 ~~NIKIA LAURA MAELANE CH~~

party of the first part, and PRECILIA OKORONKWO AND OCHIEZE OKORONKWO AS JOINT TENANTS RESIDING AT 948 E. 219<sup>TH</sup> STREET, BRONX, NEW YORK 10467.

party of the second part,

WITNESSETH, that the party of the first part, in consideration of

\$10.00 dollars

paid by the party of the second part, does hereby grant and release unto the party of the second part, the heirs or successors and assigns of the party of the second part forever,

ALL that certain plot, piece or parcel of land, with the buildings and improvements thereon erected, situate, lying and being in the

62-7956-3-2005  
BIR - 4749  
LOT - 52

SEE " SCHEDULE A" ATTACHED HERETO

BEING AND INTENDED TO BE THE SAME PREMISES AS DESCRIBED IN DEED DATED 10-13-1981 AND RECORDED 10-26-1981 IN REEL 457 PAGE 532.

TOGETHER with all right, title and interest, if any, of the party of the first part in and to any streets and roads abutting the above described premises to the center lines thereof; TOGETHER with the appurtenances and all the estate and rights of the party of the first part in and to said premises; TO HAVE AND TO HOLD the premises herein granted unto the party of the second part, the heirs or successors and assigns of the party of the second part forever.

AND the party of the first part covenants that the party of the first part has not done or suffered anything whereby the said premises have been encumbered in any way whatever, except as aforesaid.

AND the party of the first part, in compliance with Section 13 of the Lien Law, covenants that the party of the first part will receive the consideration for this conveyance and will hold the right to receive such consideration as a trust fund to be applied first for the purpose of paying the cost of the improvement and will apply the same first to the payment of the cost of the improvement before using any part of the total of the same for any other purpose. The word "party" shall be construed as if it read "parties" whenever the sense of this indenture so requires.

IN WITNESS WHEREOF, the party of the first part has duly executed this deed the day and year first above written.

IN PRESENCE OF:

Andrea Mendez

Laura Maelane by Larrine Gholston  
LAURA M. WIGFALL as attorney-in-fact  
Larrine Gholston  
LARRINE GHOLSTON

## Schedule A Description

per GE-7956-B-2005

Page 1

ALL that certain plot, piece or parcel of land, situate, lying and being in the County of Bronx, City and State of New York, lying and being in the County of Bronx, City and State of New York;

BEGINNING at a point on the easterly side of Mickle Avenue, distant 246.39 feet southerly from the corner formed by the intersection of the easterly side of Mickle Avenue with the southerly side of Givan Avenue;

RUNNING THENCE easterly at right angles to Mickle Avenue 95 feet;

THENCE southerly parallel with Mickle Avenue 22.91 feet;

THENCE westerly again at right angles to Mickle Avenue, and part of the distance through a party wall, 95 feet to the easterly side of Mickle Avenue; and

THENCE northerly along the easterly side of Mickle Avenue 22.91 feet to the point or place of BEGINNING.

I INSURE

**ACKNOWLEDGEMENT TAKEN IN NEW YORK STATE**

State of New York, County of BRONX, ss:

On the 17 day of JANUARY in the year 2006, before me, the undersigned, personally appeared

*Larrine Gholston*

, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument

*[Signature]*  
**DANIMULLAEV**

**Notary Public, State of New York  
No. 01MU6090167  
Qualified in Queens County  
Commission Expires April 7, 2007**

**ACKNOWLEDGEMENT BY SUBSCRIBING WITNESS  
TAKEN IN NEW YORK STATE**

State of New York, County of , ss:

On the day of in the year , before me, the undersigned, a Notary Public in and for said State, personally appeared , the

subscribing witness to the foregoing instrument, with whom I am personally acquainted, who, being by me duly sworn, did depose and say that he/she/they reside(s) in

(if the place of residence is in a city, include the street and street number if any; thereof):  
that he/she/they know(s)

to be the individual described in and who executed the foregoing instrument; that said subscribing witness was present and saw said

execute the same; and that said witness at the same time subscribed his/her/their name(s) as a witness thereto

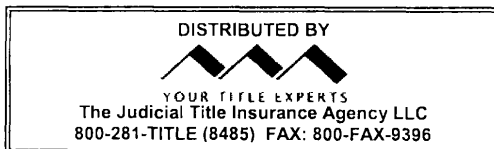
**Bargain and Sale Deed  
With Covenants**

**Title No. GE-7956-2005**

**LAURA M. WIGFALL AND LARRINE GHOLSTON**

**TO**

**PRECILIA OKORONKWO AND OCHIEZE OKORONKWO**



**ACKNOWLEDGEMENT TAKEN IN NEW YORK STATE**

State of New York, County of , ss:

On the day of in the year , before me, the undersigned, personally appeared

, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

**ACKNOWLEDGEMENT TAKEN OUTSIDE NEW YORK STATE**

\*State of , County of , ss:

\*(Or insert District of Columbia, Territory, Possession or Foreign County)

On the day of in the year , before me the undersigned personally appeared

Personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity(ies), that by his/her/their signature(s) on the instrument, the individual(s) or the person upon behalf of which the individual(s) acted, executed the instrument, and that such individual make such appearance before the undersigned in the

(add the city or political subdivision and the state or country or other place the acknowledgement was taken).

SECTION:

BLOCK: 4748

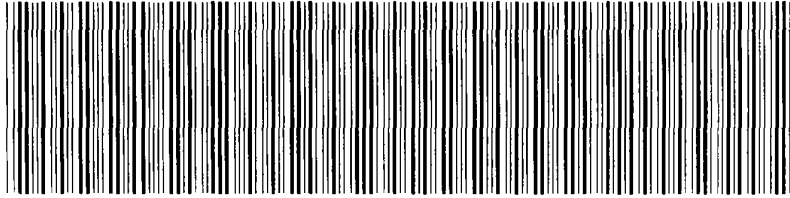
LOT: 52

COUNTY OR TOWN: BRONX

**RETURN BY MAIL TO:**

PRECILIA OKORONKWO AND OCHIEZE OKORONKWO  
32-30 MICKLE AVENUE, BRONX, NEW YORK 10469

NYC DEPARTMENT OF FINANCE  
OFFICE OF THE CITY REGISTER



2006013101714002001S8B19

**SUPPORTING DOCUMENT COVER PAGE**

**PAGE 1 OF 1**

**Document ID: 2006013101714002**

Document Date: 01-17-2006

Preparation Date: 01-31-2006

Document Type: DEED

**ASSOCIATED TAX FORM ID: 2006011600283**

**SUPPORTING DOCUMENTS SUBMITTED:**

RP - 5217 REAL PROPERTY TRANSFER REPORT  
SMOKE DETECTOR AFFIDAVIT

Page Count

2

1

FOR CITY USE ONLY

C1. County Code  C2. Date Deed Recorded  /  /   
 Month Day Year

C3. Book  OR C4. Page   
 C5. CRFN



## REAL PROPERTY TRANSFER REPORT

STATE OF NEW YORK  
STATE BOARD OF REAL PROPERTY SERVICES

RP - 5217NYC

(Rev 11/2002)

## PROPERTY INFORMATION

1. Property Location  32-30  MICKLE AVENUE  BRONX  10469  
 STREET NUMBER STREET NAME BOROUGH ZIP CODE

2. Buyer Name  OKORONKWO  OCHIEZE  
 LAST NAME / COMPANY FIRST NAME  
 OKORONKWO  PRECILIA  
 LAST NAME / COMPANY FIRST NAME

3. Tax Billing Address  Indicate where future Tax Bills are to be sent  
 if other than buyer address (at bottom of form)  LAST NAME / COMPANY FIRST NAME  
 STREET NUMBER AND STREET NAME CITY OR TOWN STATE ZIP CODE

4. Indicate the number of Assessment Roll parcels transferred on the deed  1 # of Parcels OR ☐ Part of a Parcel

5. Deed Property Size  FRONT FEET X  DEPTH OR  ACRES

8. Seller Name  GHOLSTON  LARRINE  
 LAST NAME / COMPANY FIRST NAME  
 LAURA M WIGFALL N/K/A LAURA MAE LANE  
 LAST NAME / COMPANY FIRST NAME

4A. Planning Board Approval - N/A for NYC

4B. Agricultural District Notice - N/A for NYC

Check the boxes below as they apply:

6. Ownership Type is Condominium ☐7. New Construction on Vacant Land ☐

9. Check the box below which most accurately describes the use of the property at the time of sale:

- A ☐ One Family Residential C ☐ Residential Vacant Land E ☐ Commercial G ☐ Entertainment / Amusement I ☐ Industrial  
 B ☒ 2 or 3 Family Residential D ☐ Non-Residential Vacant Land F ☐ Apartment H ☐ Community Service J ☐ Public Service

## SALE INFORMATION

10. Sale Contract Date  11 / 15 / 2005  
 Month Day Year

11. Date of Sale / Transfer  1 / 17 / 2006  
 Month Day Year

12. Full Sale Price \$  4 2 5 0 0 0  
 ( Full Sale Price is the total amount paid for the property including personal property.  
 This payment may be in the form of cash, other property or goods, or the assumption of  
 mortgages or other obligations. ) Please round to the nearest whole dollar amount.

13. Indicate the value of personal property included in the sale

14. Check one or more of these conditions as applicable to transfer:  
 A ☐ Sale Between Relatives or Former Relatives  
 B ☐ Sale Between Related Companies or Partners in Business  
 C ☐ One of the Buyers is also a Seller  
 D ☐ Buyer or Seller is Government Agency or Lending Institution  
 E ☐ Deed Type not Warranty or Bargain and Sale (Specify Below )  
 F ☐ Sale of Fractional or Less than Fee Interest ( Specify Below )  
 G ☐ Significant Change in Property Between Taxable Status and Sale Dates  
 H ☐ Sale of Business is Included in Sale Price  
 I ☐ Other Unusual Factors Affecting Sale Price ( Specify Below )  
 J ☒ None

## ASSESSMENT INFORMATION - Data should reflect the latest Final Assessment Roll and Tax Bill

15. Building Class  A 5 16. Total Assessed Value (of all parcels in transfer)

17. Borough, Block and Lot / Roll Identifier(s) ( If more than three, attach sheet with additional identifier(s) )  
 BRONX 4748 52

## CERTIFICATION

I certify that all of the items of information entered on this form are true and correct (to the best of my knowledge and belief) and I understand that the making of any willful false statement of material fact herein will subject me to the provisions of the penal law relative to the making and filing of false instruments.

BUYER

BUYER'S ATTORNEY

BUYER SIGNATURE  DATE

STREET NUMBER  STREET NAME (AFTER SALE)

CITY OR TOWN  STATE  ZIP CODE

LAST NAME  FIRST NAME

718  423-2411  
 AREA CODE TELEPHONE NUMBER

SELLER

SELLER SIGNATURE  DATE

2006011600283201

**FOR CITY USE ONLY**

C1. County Code \_\_\_\_\_ C2. Date Deed Recorded \_\_\_\_\_  
Month Day Year  
C3. Book OR \_\_\_\_\_ C4. Page \_\_\_\_\_  
C5.GRFN \_\_\_\_\_

**REAL PROPERTY TRANSFER REPORT**

**STATE OF NEW YORK  
STATE BOARD OF REAL PROPERTY SERVICES**

**RP - 5217NYC**

**(REV 11/2002)**

### PROPERTY INFORMATION

<b>1. Property Location</b>	32-30	MICKLE AVENUE	BRONX	10469					
	STREET NUMBER	STREET NAME	BOROUGH	ZIP CODE					
<b>2. Buyer Name</b>	OKARENKWO		OCHIEZE						
	LAST NAME / COMPANY		FIRST NAME						
	OKARENKWO		PRECILIA						
	LAST NAME / COMPANY		FIRST NAME						
<b>3. Tax Billing Address</b>	Indicate where future Tax Bills are to be sent if other than buyer address (at bottom of form)								
	LAST NAME / COMPANY		FIRST NAME						
	STREET NUMBER AND STREET NAME		CITY OR TOWN	STATE ZIP CODE					
<b>4. Indicate the number of Assessment Roll parcels transferred on the deed</b>	1		# of Parcels OR <input type="checkbox"/> Part of a Parcel						
<b>5. Deed Property Size</b>	FRONT FEET X DEPTH		OR ACRES						
<b>6. Seller Name</b>	GHOLSTON		LARRINE						
	LAST NAME / COMPANY		FIRST NAME						
	LANE		LAURA						
	LAST NAME / COMPANY		FIRST NAME						
<b>9. Check the box below which most accurately describes the use of the property at the time of sale:</b>									
A <input type="checkbox"/>	One Family Residential	C <input type="checkbox"/>	Residential Vacant Land	E <input type="checkbox"/>	Commercial Apartment	G <input type="checkbox"/>	Entertainment / Amusement	I <input type="checkbox"/>	Industrial
B <input checked="" type="checkbox"/>	2 or 3 Family Residential	D <input type="checkbox"/>	Non-Residential Vacant Land	F <input type="checkbox"/>	Apartment	H <input type="checkbox"/>	Community Service	J <input type="checkbox"/>	Public Service

**SALE INFORMATION**

10. Sale Contract Date 11 / 15 / 2005  
Month Day Year

11. Date of Sale / Transfer 1 / 17 / 2006  
Month Day Year

12. Full Sale Price \$ 4 2 5 0 0 0

( Full Sale Price is the total amount paid for the property including personal property. This payment may be in the form of cash, other property or goods, or the assumption of mortgages or other obligations.) Please round to the nearest whole dollar amount.

13. Indicate the value of personal property included in the sale \_\_\_\_\_

14. Check one or more of these conditions as applicable to transfer:

A	<input type="checkbox"/>	Sale Between Relatives or Former Relatives
B	<input type="checkbox"/>	Sale Between Related Companies or Partners in Business
C	<input type="checkbox"/>	One of the Buyers is also a Seller
D	<input type="checkbox"/>	Buyer or Seller is Government Agency or Lending Institution
E	<input type="checkbox"/>	Deed Type not Warranty or Bargain and Sale (Specify Below)
F	<input type="checkbox"/>	Sale of Fractional or Less than Fee Interest (Specify Below)
G	<input type="checkbox"/>	Significant Change in Property Between Taxable Status and Sale Dates
H	<input type="checkbox"/>	Sale of Business is Included in Sale Price
I	<input type="checkbox"/>	Other Unusual Factors Affecting Sale Price (Specify Below)
J	<input checked="" type="checkbox"/>	None

**ASSESSMENT INFORMATION** - Data should reflect the latest Final Assessment Roll and Tax Bill

16. Building Class A 5 16. Total Assessed Value (of all parcels in transfer) \_\_\_\_\_

17. Borough, Block and Lot / Roll Identifier(s) ( If more than three, attach sheet with additional identifier(s) )

BRONX 4748 52

## CERTIFICATION

**CERTIFICATION** I certify that all of the items of information entered on this form are true and correct (to the best of my knowledge and belief) and I understand that the making of any willful false statement of material fact herein will subject me to the provisions of the penal law relative to the making and filing of false instruments.

BUYER

1-17-06

BUYER SIGNATURE

32-30

Mickle Ave

STREET NUMBER

STREET NAME (AFTER SALE)

Brooklyn

NY 10469

CITY OR TOWN

STATE

ZIP CODE

**BUYER'S ATTORNEY**

*Dome* | *Indray*

LAST NAME | FIRST NAME

718 | 423-2411

AREA CODE | TELEPHONE NUMBER

**SELLER**

*Larrene Hug full* | *Kharston*


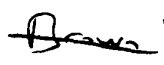
SELLER SIGNATURE | DATE

2006011600283201  
Lara and Lane by name. Weston  
is attorney-in-fact



**CERTIFICATION**

I certify that all of the items of information entered on this form are true and correct (to the best of my knowledge and belief) and understand that the making of any willful false statement of material fact herein will subject me to the provisions of the penal law relative to the making and filing of false instruments.

 <small>BUYER SIGNATURE</small>		<b>BUYER</b> 1-17-05 <small>DATE</small>		 <b>BUYER'S ATTORNEY</b>	
32.30 <small>STREET NUMBER</small>		Michka Ave <small>STREET NAME (AFTER SALE)</small>		718 <small>AREA CODE</small>	
Bronx <small>CITY OR TOWN</small>		NY <small>STATE</small>		10464 <small>ZIP CODE</small>	
		423-2411 <small>TELEPHONE NUMBER</small>		<b>SELLER</b> Lammie Vignale Shalston Kiera mae Lane by <small>SELLER SIGNATURE</small>	
				Jan 17, 2006 <small>DATE</small>	

Lammie Vignale Shalston  
as Attorney in Fact

2006011600283201

Affidavit of Compliance with Smoke Detector Requirement for One and Two Family Dwellings

# **AFFIDAVIT OF COMPLIANCE WITH SMOKE DETECTOR REQUIREMENT FOR ONE- AND TWO-FAMILY DWELLINGS**

State of New York )  
 ) SS.:  
County of Bronx )

The undersigned, being duly sworn, depose and say under penalty of perjury that they are the grantor and grantee of the real property or of the cooperative shares in a cooperative corporation owning real property located at

32-30 MICKLE AVENUE

<u>BRONX</u>	New York,	<u>4748</u>	<u>52</u>	(the "Premises");
Borough		Block	Lot	

That the Premises is a one or two family dwelling, or a cooperative apartment or condominium unit in a one- or two-family dwelling, and that installed in the Premises is an approved and operational smoke detecting device in compliance with the provisions of Article 6 of Subchapter 17 of Chapter 1 of Title 27 of the Administrative Code of the City of New York concerning smoke detecting devices;

That they make affidavit in compliance with New York City Administrative Code Section 11-2105 (g). (The signatures of at least one grantor and one grantee are required, and must be notarized).

Larone WIGFALL GHOLSTON

Larone Wiggall Gholston  
Name of Grantor (Type or Print)

Signature of Grantor

P. D. Gholston  
Name of Grantee (Type or Print)

Signature of Grantee

Sworn to before me  
this 17 date of January 2006

DAN MULLAEV  
Notary Public, State of New York  
No. 01MU6090167  
Qualified in Queens County

Commission Expires April 7, 2007

Sworn to before me  
this 17 date of January 2006

DAN MULLAEV  
Notary Public, State of New York  
No. 01MU 6090167  
Qualified in Queens County  
Commission Expires April 7, 2007

These statements are made with the knowledge that a willfully false representation is unlawful and is punishable as a crime of perjury under Article 210 of the Penal Law.

**NEW YORK CITY REAL PROPERTY TRANSFER TAX RETURNS FILED ON OR AFTER FEBRUARY 6th, 1990, WITH RESPECT TO THE CONVEYANCE OF A ONE- OR TWO-FAMILY DWELLING, OR A COOPERATIVE APARTMENT OR A CONDOMINIUM UNIT IN A ONE- OR TWO-FAMILY DWELLING, WILL NOT BE ACCEPTED FOR FILING UNLESS ACCOMPANIED BY THIS AFFIDAVIT.**

**AFFIDAVIT OF COMPLIANCE WITH  
CARBON MONOXIDE DETECTOR REQUIREMENT  
FOR ONE AND TWO FAMILY DWELLINGS**

The undersigned, being duly sworn, depose and say that under penalty of perjury that they are the grantor of the real property or of the cooperative shares in a cooperative corporation owning real property located at:

32-30 Mickle Av,                     ,  
Street Address Unit/Apt.  
Bronx New York. (the "Premises");  
City/Town

That the premises is a one or two family dwelling, or a cooperative apartment or condominium unit in a one-or-two family dwelling, and that installed in the Premises is an approved and operational carbon monoxide detecting device in compliance with subdivision 5-a of Section 378 of the Executive Law concerning carbon monoxide detectors.

Laraine Gholish  
Name of Grantor

Laraine Gholish  
Signature of Grantor

1-17-2006  
Date

**DANIMULLAEV**  
Notary Public, State of New York  
No. 01MU6090167  
Qualified in Queens County  
Commission Expires April 7, 2007

Precilia Olorunkun  
Name of Grantee

Precilia Olorunkun  
Signature of Grantee

1-17-2006  
Date

**DANIMULLAEV**  
Notary Public, State of New York  
No. 01MU6090167  
Qualified in Queens County  
Commission Expires April 7, 2007

These statements are made with the knowledge that a willfully false representation is unlawful and is punishable as a crime under article 210 of the penal code.